Division of Corporations Electropic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000342473 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

TÇ:

Division of Corporations

Fax Number : (850)617-6333

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : 119990000006 Phone : (407)425-7010 Pax Number : (407)425-2747

Enter the email address for this business entity to be used for fulligation annual report mailings. Enter only one email address please.

Email Address: jlagmay@wendovergroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BERKELEY LANDING GP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

T. CLINE DEC -4 2018

EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

12/3/2018, 9:54 AM

H18000342473 3

COVER LETTER

	gistration Se ision of Cor					
eub meer.	BERKELE	Y LANDING GP, LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Amy E. Jellicorse, Esq.				
			Name of Person	- <u></u>	-	
		Zimmerman Kiser Sutcliff	e, P.A.			
			Firm/Company		-	
		315 E. Robinson Street, St	uite 600			
			Address		•	
		Orlando, Florida 32801				
		jlagmay@wendovergroup.c	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	•	
		• • • •	to be used for future armusi r	eport notification)		
For further i	nformation c	oncerning this matter, please c	all:			
Amy Jellico	orse		407 425	5-7010		
	Name o	f Persor.	Area Code	Daytime Telephone Numbe		
Enclosed is	a check for th	ne following amount:				
≘ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is excl	Certifica (osed) Certifica	ite of Status 😂 💮	
	Regisu Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registrati Division o Clifton B 2661 Exe	COURIER ADDRESS: on Section of Corporations uilding cutive Center Circle ee, FL 32301	3 AM 9: 35 YOF STATE ECFLORIDA	

H18000342473 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BERKELEY LANDING GP, LLC	
(Name of the Limited)	Liability Company as it now appears on our records.) Florida Limited Liability Compuny)
The Articles of Organization for this Limited Liabi Florida document number <u>L16000148738</u>	ility Company were filed on 08/10/2016 and assigned
This amendment is submitted to amend the follow	ing:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:
(Principal office address MUST BE A STREET)	4DDRESS)
	49-A
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter the name of the new e address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Reg	
provisions of all statutes relative to the proper accept the obligations of my position as registe	9: 35 ORIO,A
	If Changing Progressed Agent Signature of Very Registered Agent

H18000342473 3

If amending Authorized Person(s) authorized to manage, enter the tifle, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Title</u> Name Address		Type of Action	
MGR and MBR	Jonethan L. Wolf	1195 Kensington Park Drive		
		Suite 200	 -	
			Remove	
		Altamonte Springs, FL 3271-	€ Change	
			□ Add	
			☐ Remove	
			Change	
			□ Remove	
			☐ Change	
			🖸 Remove	
		·	☐ Change	
				
			C Recognize	
			110 Dec -3 AM & 35 to Change 35	
			FIGURATION C	
			⊞ 35 □ Change	

H18000342			t this to a	,	
. Il amendu	ng any other information, en	iter change(s) here: (Att	ach additional sheets, if neces	sary.)	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·	~
					-
 -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•	_
	74.64.64.64.64.64.64.64.64.64.64.64.64.64				-
		· · · · · · · · · · · · · · · · · · ·			_
- THE PERSON			***************************************		~
					-
					_
****					_
					_
		W-14-14			•-
د معرب معرب المعرب					-
	4				
				····	
			**************************************	···· V. 24.4 2. ************************************	••
					- .
(If an effective	late, if other than the date of date is listed, the date must be speci e date inserted in this block does	ific and cannot be prior to oate:	option of filing or more than 90 days after fil notory filing requirements, this o	ling.) Pursuant to 60	05.0207 (1 sted as II
document's	effective date on the Departmen	nt of State's records.			
	specifi es a delayed effect h day after the record is f		ffective time, at 12:01 a.	m. on the earl	ier of:
Dated	11-76	2018			
<u></u>					2010
-	Signatur	e of a momber or authorized re	presentative of a member		DEC
	Jonathan L. Wolf, Manager and	. Member		Si	1

Typed or printed name of signee

Page 3 of 3 Filing Fee: \$25.00